

SERFF Tracking Number:	CNNB-125527729	State:	Arkansas
Filing Company:	The Cincinnati Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	DA-08-7043-AR		
TOI:	19.0 Personal Auto	Sub-TOI:	19.0001 Private Passenger Auto (PPA)
Product Name:	Personal Auto - CID Withdrawal		
Project Name/Number:	/		

## Filing at a Glance

Company: The Cincinnati Insurance Company

Product Name: Personal Auto - CID Withdrawal SERFF Tr Num: CNNB-125527729 State: Arkansas

TOI: 19.0 Personal Auto

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 19.0001 Private Passenger Auto  
(PPA)

Co Tr Num: DA-08-7043-AR

State Status: Fees verified and  
received

Filing Type: Form

Co Status:

Reviewer(s): Alexa Grissom, Betty  
Montesi, Brittany Yielding

Author: Matt Terrell

Disposition Date: 05/05/2008

Date Submitted: 03/07/2008

Disposition Status: Withdrawn

Effective Date Requested (New): 10/01/2008

Effective Date (New): 10/01/2008

Effective Date Requested (Renewal): 10/01/2008

Effective Date (Renewal):

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 05/05/2008

State Status Changed: 03/11/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Withdrawal of The Cincinnati Indemnity Company's forms.

## Company and Contact

### Filing Contact Information

Matt Terrell, Senior Filings Analyst  
6200 S. Gilmore Road

matt\_terrell@cinfin.com  
(513) 603-5264 [Phone]

<i>SERFF Tracking Number:</i>	<i>CNNB-125527729</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>DA-08-7043-AR</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Personal Auto - CID Withdrawal</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Fairfield, OH 45014

(513) 881-8885[FAX]

**Filing Company Information**

The Cincinnati Insurance Company

CoCode: 10677

State of Domicile: Ohio

6200 S. Gilmore Rd.

Group Code: 244

Company Type:

Fairfield, OH 45014

Group Name:

State ID Number:

(513) 870-2000 ext. [Phone]

FEIN Number: 31-0542366

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## Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Cincinnati Insurance Company	\$50.00	03/07/2008	18430801

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Withdrawn	Alexa Grissom	05/05/2008	05/05/2008

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending	Alexa Grissom	03/11/2008	04/21/2008	Matt Terrell	05/05/2008	05/05/2008
Industry						
Response						

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Company	Note To Reviewer	Matt Terrell	03/07/2008	03/07/2008

<i>SERFF Tracking Number:</i>	<i>CNNB-125527729</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>DA-08-7043-AR</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Personal Auto - CID Withdrawal</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Disposition

Disposition Date: 05/05/2008  
Effective Date (New): 10/01/2008  
Effective Date (Renewal):  
Status: Withdrawn  
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CNNB-125527729 State: Arkansas  
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Company Tracking Number: DA-08-7043-AR  
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto - CID Withdrawal  
Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Withdrawn	Yes
Form	UNINSURED/UNDERINSURED MOTORIST COVERAGE OPTION SELECTION FORM A	Withdrawn	Yes
Form	ACKNOWLEDGMENT OF AUTOMOBILE RATES	Withdrawn	Yes
Form	ARKANSAS NO FAULT COVERAGE OPTIONS	Withdrawn	Yes
Form	REINSTATEMENT ENDORSEMENT	Withdrawn	Yes
Form	AUTO INSURANCE MEDICAL REPORT	Withdrawn	Yes
Form	ACORD AUTO SUPPLEMENT APPLICATION	Withdrawn	Yes
Form	AUTO LIABILITY I.D. CARD	Withdrawn	Yes
Form	REINSTATEMENT OF INSURANCE	Withdrawn	Yes
Form	FEDERAL EMPLOYEES USING AUTO IS GOVERNMENT BUSINESS	Withdrawn	Yes
Form	COVERAGE FOR TAPES, RECORDS, DISCS OR OTHER MEDIA	Withdrawn	Yes
Form	LOSS PAYABLE CLAUSE	Withdrawn	Yes
Form	EXTENDED NONOWNED COVERAGE FOR NAMED INDIVIDUAL(S)	Withdrawn	Yes
Form	COVERED PROPERTY COVERAGE	Withdrawn	Yes
Form	UIM COVERAGE FOR BODILY INJURY AND PROPERTY DAMAGE - AR	Withdrawn	Yes
Form	THEFT COVERAGE FOR AUDIO, VISUAL AND DATA ELECTRONIC TRANSMITTING EQUIPMENT	Withdrawn	Yes
Form	CUSTOMIZING EQUIPMENT COVERAGE	Withdrawn	Yes
Form	ADDITIONAL INSURED - LESSOR	Withdrawn	Yes
Form	NAMED NONOWNER COVERAGE	Withdrawn	Yes
Form	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT	Withdrawn	Yes
Form	MISCELLANEOUS TYPE VEHICLE	Withdrawn	Yes

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#### ENDORSEMENT SCHEDULE

<b>Form</b>	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT (MH - EXCLUDING RENTAL)	Withdrawn	Yes
<b>Form</b>	JOINT OWNERSHIP COVERAGE	Withdrawn	Yes
<b>Form</b>	PIP COVERAGE - AR	Withdrawn	Yes
<b>Form</b>	ADDITIONAL INSURED (AUTO)	Withdrawn	Yes
<b>Form</b>	AUTO SCHEDULE	Withdrawn	Yes
<b>Form</b>	PERSONAL AUTO APPLICATION	Withdrawn	Yes
<b>Form</b>	UM MOTORISTS COVERAGE FOR BI AND PD	Withdrawn	Yes
<b>Form</b>	UM MOTORISTS COVERAGE FOR BI AND PD	Withdrawn	Yes
<b>Form</b>	SNOWPLOW LIABILITY ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	SNOWPLOW EXCLUSION ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	MISCELLANEOUS TYPE VEHICLE AMENDMENT (MH INCLUDING RENTAL)	Withdrawn	Yes
<b>Form</b>	AMENDMENT OF POLICY PROVISIONS - AR	Withdrawn	Yes
<b>Form</b>	MOTORCYCLE SEASONAL ENDORSEMENT SPECIAL ENDORSEMENT APPLICABLE ONLY TO MOTORCYCLE COV	Withdrawn	Yes
<b>Form</b>	EXHIBITION AUTO ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	MEDICAL PAYMENTS COVERAGE SNOWMOBILES	Withdrawn	Yes
<b>Form</b>	MED PAY COVERAGE MOTORCYCLES	Withdrawn	Yes
<b>Form</b>	GAP COVERAGE - AUTO	Withdrawn	Yes
<b>Form</b>	GOOD STUDENT CERTIFICATE	Withdrawn	Yes
<b>Form</b>	ROLLOVER APPLICATION	Withdrawn	Yes
<b>Form</b>	COVERAGE EXCLUSION	Withdrawn	Yes
<b>Form</b>	AUTO LIABILITY I.D. CARD	Withdrawn	Yes

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<b>Form</b>	PASSENGER HAZARD EXCLUSION	Withdrawn	Yes
<b>Form</b>	PASSENGER HAZARD COVERAGE	Withdrawn	Yes
<b>Form</b>	AUTOMOBILE EXCLUSION OF NAMED DRIVER	Withdrawn	Yes
<b>Form</b>	FAMILY AUTO POLICY OR HOMEOWNERS AUTO ENDORSEMENT SUPPLEMENTARY DEC	Withdrawn	Yes
<b>Form</b>	AUTO CHANGE ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	PERSONAL AUTO POLICY	Withdrawn	Yes
<b>Form</b>	SPECIAL LARGE DEDUCTIBLE ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	PERSONAL AUTO POLICY DEC	Withdrawn	Yes
<b>Form</b>	FAMILY AUTO POLICY DEC RENEWAL CERTIFICATE	Withdrawn	Yes
<b>Form</b>	POLICY RELEASE	Withdrawn	Yes
<b>Form</b>	GENERAL CHANGE ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	GENERAL CHANGE ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	AUTO POLICY UPDATE	Withdrawn	Yes
<b>Form</b>	YOUTHFUL OPERATOR QUESTIONNAIRE	Withdrawn	Yes
<b>Form</b>	IMPORTANT NOTICE	Withdrawn	Yes
<b>Form</b>	INDIVIDUAL HEALTH QUESTIONNAIRE	Withdrawn	Yes
<b>Form</b>	NOTICE OF PRIVACY PRACTICES	Withdrawn	Yes
<b>Form</b>	NOTICE OF INSURANCE INFORMATION PRACTICES	Withdrawn	Yes
<b>Form</b>	GENERAL CHANGE ENDORSEMENT	Withdrawn	Yes
<b>Form</b>	ARKANSAS NOTICE	Withdrawn	Yes
<b>Form</b>	NOTICE TO POLICYHOLDERS PERSONAL AUTO PROGRAM	Withdrawn	Yes
<b>Form</b>	UNIVERSAL DEC	Withdrawn	Yes
<b>Form</b>	UNIVERSAL DEC	Withdrawn	Yes
<b>Form</b>	YOUR PERSONAL INSURANCE POLICY	Withdrawn	Yes
<b>Form</b>	YOUR PERSONAL INSURANCE	Withdrawn	Yes



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<i>Company Tracking Number:</i>	<i>DA-08-7043-AR</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Personal Auto - CID Withdrawal</i>		
<i>Project Name/Number:</i>	<i>/</i>		

**POLICY**

<b>Form</b>	AGENTS AUTO RENEWAL QUESTIONNAIRE	Withdrawn	Yes
<b>Form</b>	AUTO RENEWAL CERTIFICATE	Withdrawn	Yes
<b>Form</b>	EXHIBITION AUTO SUPPLEMENT	Withdrawn	Yes

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Product Name: Personal Auto - CID Withdrawal  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 03/11/2008

Submitted Date 04/21/2008

Respond By Date

Dear Matt Terrell,

This will acknowledge receipt of the captioned filing. Please advise if you are totally withdrawing from this line of business. If so, please refer to Ark. Code Ann. 23-63-211(e) which would require compliance.

Please feel free to contact me if you have questions.

Sincerely,

Alexa Grissom

## Response Letter

Response Letter Status Submitted to State

Response Letter Date 05/05/2008

Submitted Date 05/05/2008

Dear Alexa Grissom,

### Comments:

### Response 1

Comments: Yes. We are withdrawing Personal Auto from The Cincinnati Indemnity Company. However, the company listed as the "Filing Company" says "The Cincinnati Insurance Company".

Written notification, as required by code 23-63-211 (e), will be mailed today to the Insurance Department.

### Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

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*State Tracking Number:*      *EFT \$50*

*Company Tracking Number:*      *DA-08-7043-AR*

*TOI:*      *19.0 Personal Auto*

*Sub-TOI:*      *19.0001 Private Passenger Auto (PPA)*

*Product Name:*      *Personal Auto - CID Withdrawal*

*Project Name/Number:*      */*

**Sincerely,**

**Matt Terrell**

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<i>Company Tracking Number:</i>	<i>DA-08-7043-AR</i>		
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<i>Product Name:</i>	<i>Personal Auto - CID Withdrawal</i>		
<i>Project Name/Number:</i>	<i>/</i>		

**Note To Reviewer**

**Created By:**

Matt Terrell on 03/07/2008 09:31 AM

**Subject:**

Company

**Comments:**

This filing was incorrectly marked for The Cincinnati Insurance Company. It is actually applicable for The Cincinnati Indemnity Company.

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Product Name: Personal Auto - CID Withdrawal  
Project Name/Number: /

## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Withdrawn	UNINSURED/UN DERINSURED MOTORIST COVERAGE OPTION SELECTION FORM A	AP401AR	1/00	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	ACKNOWLEDG MENT OF AUTOMOBILE RATES	AP408	5/90	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	ARKANSAS NO FAULT COVERAGE OPTIONS	AP434AR	5/96	Endorsement/Withdrawn nt/Amendm ent/Condi tions	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	REINSTATEMEN T ENDORSEMENT	AR2	4/99	Endorsement/Withdrawn nt/Amendm ent/Condi tions	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	AUTO INSURANCE MEDICAL REPORT	CA1030	4/02	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	ACORD AUTO SUPPLEMENT APPLICATION	CA1306C D	11/04	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	AUTO LIABILITY I.D. CARD	CL1028A	11/94	Certificate Withdrawn	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	REINSTATEMEN T OF INSURANCE	CPA0202	1/01	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:		
Withdrawn	FEDERAL	CPA0301	1/01	Endorsement/Withdrawn	Replaced Form #:0.00		

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Product Name: Personal Auto - CID Withdrawal  
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	EMPLOYEES USING AUTO IS GOVERNMENT BUSINESS		nt/Amendm ent/Condi ons	Previous Filing #:
Withdrawn	COVERAGE FOR TAPES, RECORDS, DISCS OR OTHER MEDIA	CPA0304 1/01	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	LOSS PAYABLE CLAUSE	CPA0305 1/01	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	EXTENDED NONOWNED COVERAGE FOR NAMED INDIVIDUAL(S)	CPA0306 1/01	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	COVERED PROPERTY COVERAGE	CPA0307 5/84	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	UIM COVERAGE FOR BODILY INJURY AND PROPERTY DAMAGE - AR	CPA0311 4/08 AR	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	THEFT COVERAGE FOR AUDIO, VISUAL AND DATA ELECTRONIC TRANSMITTING EQUIPMENT	CPA0313 1/01	Endorseme nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	CUSTOMIZING EQUIPMENT COVERAGE	CPA0318 1/01	Endorseme nt/Amendm ent/Condi	Replaced Form #:0.00  Previous Filing #:

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Withdrawn	ADDITIONAL INSURED - LESSOR	CPA0319 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	NAMED NONOWNER COVERAGE	CPA0322 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT	CPA0323 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT SCHEDULE	CPA0323 1/01 A	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT (MH - EXCLUDING RENTAL)	CPA0328 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	JOINT OWNERSHIP COVERAGE	CPA0334 10/04	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	PIP COVERAGE - AR	CPA0564 4/08 AR	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	ADDITIONAL INSURED (AUTO)	CPA1002 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00 Previous Filing #:
Withdrawn	AUTO	CPA1004 1/01	Endorsement/Amendment/Condition Withdrawn	Replaced Form #:0.00

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SCHEDULE				nt/Amendm ent/Condi ons	Previous Filing #:
Withdrawn	PERSONAL AUTO APPLICATION	CPA1005 CD	11/04	Application/Withdrawn Binder/Enro llment	Replaced Form #:0.00  Previous Filing #:
Withdrawn	UM MOTORISTS COVERAGE FOR BI AND PD	CPA1023 AR	4/08	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	UM MOTORISTS COVERAGE FOR BI AND PD	CPA1023 AR	1/06	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	SNOWFLOW LIABILITY ENDORSEMENT	CPA1041	1/01	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	SNOWFLOW EXCLUSION ENDORSEMENT	CPA1045	1/01	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	MISCELLANEOU S TYPE VEHICLE AMENDMENT (MH INCLUDING RENTAL)	CPA1081	1/01	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	AMENDMENT OF POLICY PROVISIONS - AR	CPA1094 AR	4/08	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:
Withdrawn	MOTORCYCLE SEASONAL ENDORSEMENT SPECIAL ENDORSEMENT APPLICABLE	CPA1102	1/01	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00  Previous Filing #:



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ONLY TO  
MOTORCYCLE  
COV

Withdrawn	EXHIBITION AUTO ENDORSEMENT	CPA1172 1/01	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	MEDICAL PAYMENTS COVERAGE SNOWMOBILES	CPA1215 1/01	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	MED PAY COVERAGE MOTORCYCLES	CPA1222 9/04 AR	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	GAP COVERAGE - AUTO	CPA1246 1/01	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	GOOD STUDENT CERTIFICATE	CPA1248 4/02	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	ROLLOVER APPLICATION	CPA1264 4/02	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	COVERAGE EXCLUSION	CPA1337 1/01	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	AUTO LIABILITY I.D. CARD	CPA1403 6/05	Certificate	Withdrawn Replaced Form #:0.00 Previous Filing #:
Withdrawn	PASSENGER HAZARD EXCLUSION	CPA2510 1/01	Endorsement/Amendment/Conditionals	Withdrawn Replaced Form #:0.00 Previous Filing #:

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Withdrawn PASSENGER CPA2511 1/01	Endorsement Withdrawn	Replaced Form #:0.00
HAZARD	nt/Amendm	
COVERAGE	ent/Condi	Previous Filing #:
	ons	
Withdrawn AUTOMOBILE CPA2512 1/01	Endorsement Withdrawn	Replaced Form #:0.00
EXCLUSION OF	nt/Amendm	
NAMED DRIVER	ent/Condi	Previous Filing #:
	ons	
Withdrawn FAMILY AUTO CPA4000 1/01	Declaration Withdrawn	Replaced Form #:0.00
POLICY OR D	s/Schedule	
HOMEOWNERS		Previous Filing #:
AUTO		
ENDORSEMENT		
SUPPLEMENTA		
RY DEC		
Withdrawn AUTO CHANGE FA1002R 1/01	Endorsement Withdrawn	Replaced Form #:0.00
ENDORSEMENT E	nt/Amendm	
	ent/Condi	Previous Filing #:
	ons	
Withdrawn PERSONAL FA4000T 10/04	Policy/Coverage Withdrawn	Replaced Form #:0.00
AUTO POLICY	Form	
		Previous Filing #:
Withdrawn SPECIAL LARGE HOA900 5/03	Endorsement Withdrawn	Replaced Form #:0.00
DEDUCTIBLE	nt/Amendm	
ENDORSEMENT	ent/Condi	Previous Filing #:
	ons	
Withdrawn PERSONAL IFA(D) 10/04	Declaration Withdrawn	Replaced Form #:0.00
AUTO POLICY	s/Schedule	
DEC		Previous Filing #:
Withdrawn FAMILY AUTO IFARC 1/01	Certificate Withdrawn	Replaced Form #:0.00
POLICY DEC		
RENEWAL		Previous Filing #:
CERTIFICATE		
Withdrawn POLICY MI1020 10/04	Endorsement Withdrawn	Replaced Form #:0.00
RELEASE	nt/Amendm	
	ent/Condi	Previous Filing #:
	ons	
Withdrawn GENERAL MI1026 10/01	Endorsement Withdrawn	Replaced Form #:0.00

SERFF Tracking Number: CNNB-125527729 State: Arkansas  
Filing Company: The Cincinnati Insurance Company State Tracking Number: EFT \$50  
Company Tracking Number: DA-08-7043-AR  
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
Product Name: Personal Auto - CID Withdrawal  
Project Name/Number: /

Withdrawn	CHANGE ENDORSEMENT	MI1026	10/01	nt/Amendm ent/Condi ons	Previous Filing #:
Withdrawn	GENERAL CHANGE ENDORSEMENT	MI1026	10/01	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00 Previous Filing #:
Withdrawn	AUTO POLICY UPDATE	MI1148	6/03	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00 Previous Filing #:
Withdrawn	YOUTHFUL OPERATOR QUESTIONNAIR E	MI1323	4/02	Application/ Withdrawn Binder/Enro llment	Replaced Form #:0.00 Previous Filing #:
Withdrawn	IMPORTANT NOTICE	MI1378	1/06	Disclosure/ Withdrawn Notice	Replaced Form #:0.00 Previous Filing #:
Withdrawn	INDIVIDUAL HEALTH QUESTIONNAIR E	MI1417	4/02	Application/ Withdrawn Binder/Enro llment	Replaced Form #:0.00 Previous Filing #:
Withdrawn	NOTICE OF PRIVACY PRACTICES	MI1659	5/05	Disclosure/ Withdrawn Notice	Replaced Form #:0.00 Previous Filing #:
Withdrawn	NOTICE OF INSURANCE INFORMATION PRACTICES	MI1660	8/04	Disclosure/ Withdrawn Notice	Replaced Form #:0.00 Previous Filing #:
Withdrawn	GENERAL CHANGE ENDORSEMENT	MI1684	12/02	Endorseme Withdrawn nt/Amendm ent/Condi ons	Replaced Form #:0.00 Previous Filing #:
Withdrawn	ARKANSAS NOTICE	MI1722AR	1/04	Disclosure/ Withdrawn Notice	Replaced Form #:0.00 Previous Filing #:
Withdrawn	NOTICE TO POLICYHOLDER	MI1733	10/04	Disclosure/ Withdrawn Notice	Replaced Form #:0.00

SERFF Tracking Number: CNNB-125527729 State: Arkansas  
 Filing Company: The Cincinnati Insurance Company State Tracking Number: EFT \$50  
 Company Tracking Number: DA-08-7043-AR  
 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)  
 Product Name: Personal Auto - CID Withdrawal  
 Project Name/Number: /

S PERSONAL				Previous Filing #:	
AUTO					
PROGRAM					
Withdrawn	UNIVERSAL DEC	PL1050	6/04	Declaration Withdrawn s/Schedule	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	UNIVERSAL DEC	PL1050	1/96	Declaration Withdrawn s/Schedule	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	YOUR PERSONAL INSURANCE POLICY	PPJ	1/07	Advertising Withdrawn	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	YOUR PERSONAL INSURANCE POLICY	PPJB	1/07	Advertising Withdrawn	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	AGENTS AUTO RENEWAL QUESTIONNAIRE	PR1042	4/02	Application/Withdrawn Binder/Enrollment	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	AUTO RENEWAL CERTIFICATE	RCA2000	8/91	Certificate Withdrawn	Replaced Form #:0.00
				Previous Filing #:	
Withdrawn	EXHIBITION AUTO SUPPLEMENT	XA1	4/02	Endorsement/Amendment/Conditions	Replaced Form #:0.00
				Previous Filing #:	



<i>SERFF Tracking Number:</i>	<i>CNNB-125527729</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>The Cincinnati Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>DA-08-7043-AR</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Personal Auto - CID Withdrawal</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## **Rate Information**

Rate data does NOT apply to filing.

SERFF Tracking Number: CNNB-125527729

State: Arkansas

Filing Company: The Cincinnati Insurance Company

State Tracking Number: EFT \$50

Company Tracking Number: DA-08-7043-AR

TOI: 19.0 Personal Auto

Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto - CID Withdrawal

Project Name/Number: /

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-  
Property & Casualty

**Review Status:**

Withdrawn

05/05/2008

**Comments:**

**Attachments:**

#CID P&CTransmittal.pdf

CID Form Memo.pdf

# Property & Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
g. SERFF Filing #:		
h. Subject Codes		

<b>3. Group Name</b>	<b>Group NAIC #</b>
The Cincinnati Insurance Companies	10677

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
The Cincinnati Insurance Company	OH	0244-10677	31-0542366	

<b>5. Company Tracking Number</b>	<b>DA-08-7043-AR</b>
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Matt Terrell P.O. Box 145496 Cincinnati, OH 45250-5496	Senior Analyst	513.603.5264	513.881-8885	matt_terrell@cinfin.com

<b>7.</b>	Signature of authorized filer	
<b>8.</b>	Please print name of authorized filer	Matt Terrell

**Filing information** (see General Instructions for descriptions of these fields)

<b>9. Type of Insurance (TOI)</b>	Personal Auto
<b>10. Sub-Type of Insurance (Sub-TOI)</b>	Private Passenger Auto
<b>11. State Specific Product code(s) (if applicable)[See State Specific Requirements]</b>	
<b>12. Company Program Title</b> (Marketing title)	Personal Auto Program
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
<b>14. Effective Date(s) Requested</b>	New: 10/1/08                      Renewal: 10/1/08
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>16. Reference Organization</b> (if applicable)	
<b>17. Reference Organization # &amp; Title</b>	



20. This filing transmittal is part of Company Tracking #	DA-08-7043-AR
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<b>21. Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Please see the attached Form Memorandum for details

22.	<b>Filing Fees</b> (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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**Check #:** EFT  
**Amount:** 50.00

**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

Effective March 1, 2007

**\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

**THE CINCINNATI INDEMNITY COMPANY  
ARKANSAS PERSONAL AUTO  
WITHDRAWN FORMS MEMORANDUM  
DA-08-7043-AR**

<b>WITHDRAWN FORM</b>	<b>TITLE / DESCRIPTION OF CHANGE</b>
AP401AR (1/00)	UNINSURED/UNDERINSURED MOTORIST COVERAGE OPTION SELECTION FORM A
AP408 (5/90)	ACKNOWLEDGMENT OF AUTOMOBILE RATES
AP434AR (5/96)	ARKANSAS NO-FAULT COVERAGE OPTIONS
AR2 (4/99)	REINSTATEMENT ENDORSEMENT
CA1030 (4/02)	AUTOMOBILE INSURANCE MEDICAL REPORT
CA1306CD (11/04)	ACORD AUTOMOBILE SUPPLEMENT APPLICATION
CL1028A (11/94)	AUTOMOBILE LIABILITY I.D. CARD
CPA0202 (1/01)	REINSTATEMENT OF INSURANCE
CPA0301 (1/01)	FEDERAL EMPLOYEES USING AUTOS IN GOVERNMENT BUSINESS
CPA0304 (1/01)	COVERAGE FOR TAPES, RECORDS, DISCS OR OTHER MEDIA
CPA0305 (1/01)	LOSS PAYABLE CLAUSE
CPA0306 (1/01)	EXTENDED NONOWNED COVERAGE FOR NAMED INDIVIDUAL(S)
CPA0307 (5/84)	COVERED PROPERTY COVERAGE
CPA0311AR (4/08)	UNDERINSURED MOTORISTS COVERAGE FOR BODILY INJURY AND PROPERTY DAMAGE - ARKANSAS
CPA0313 (1/01)	THEFT COVERAGE FOR AUDIO, VISUAL AND DATA ELECTRONIC TRANSMITTING EQUIPMENT
CPA0318 (1/01)	CUSTOMIZING EQUIPMENT COVERAGE
CPA0319 (1/01)	ADDITIONAL INSURED - LESSOR
CPA0322 (1/01)	NAMED NONOWNER COVERAGE
CPA0323 (1/01)	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT
CPA0323A (1/01)	MISCELLANEOUS TYPE VEHICLE SCHEDULE
CPA0328 (1/01)	MISCELLANEOUS TYPE VEHICLE ENDORSEMENT (MOTOR HOMES - EXCLUDING RENTAL)
CPA0334 (10/04)	JOINT OWNERSHIP COVERAGE
CPA0564AR (4/08)	PERSONAL INJURY PROTECTION COVERAGE - ARKANSAS
CPA1002 (1/01)	ADDITIONAL INSURED (AUTOMOBILE)
CPA1004 (1/01)	AUTO SCHEDULE

**THE CINCINNATI INDEMNITY COMPANY  
ARKANSAS PERSONAL AUTO  
WITHDRAWN FORMS MEMORANDUM  
DA-08-7043-AR**

<b>WITHDRAWN FORM</b>	<b>TITLE / DESCRIPTION OF CHANGE</b>
CPA1005CD (11/04)	PERSONAL AUTOMOBILE APPLICATION
CPA1023AR (4/08)	UNINSURED MOTORISTS COVERAGE FOR BODILY INJURY AND
CPA1023AR (1/06)	PROPERTY DAMAGE ARKANSAS
CPA1041 (1/01)	SNOWPLOW LIABILITY ENDORSEMENT
CPA1045 (1/01)	SNOWPLOWING EXCLUSION ENDORSEMENT
CPA1081 (1/01)	MISCELLANEOUS TYPE VEHICLE AMENDMENT (MOTOR HOMES - INCLUDING RENTAL)
CPA1094AR (4/08)	AMENDMENT OF POLICY PROVISIONS - ARKANSAS
CPA1102 (1/01)	MOTORCYCLE SEASONAL ENDORSEMENT SPECIAL ENDORSEMENT APPLICABLE ONLY TO MOTORCYCLE COVERAGE
CPA1172 (1/01)	EXHIBITION AUTO ENDORSEMENT
CPA1215 (1/01)	MEDICAL PAYMENTS COVERAGE SNOWMOBILES
CPA1222AR (9/04)	MEDICAL PAYMENTS COVERAGE MOTORCYCLES
CPA1246 (1/01)	GAP COVERAGE - AUTO
CPA1248 (4/02)	GOOD STUDENT CERTIFICATE
CPA1264 (4/02)	ROLLOVER APPLICATION
CPA1337 (1/01)	COVERAGE EXCLUSION
CPA1403 (6/05)	AUTOMOBILE LIABILITY I.D. CARD
CPA2510 (1/01)	PASSENGER HAZARD EXCLUSION
CPA2511 (1/01)	PASSENGER HAZARD COVERAGE
CPA2512 (1/01)	AUTOMOBILE EXCLUSION OF NAMED DRIVER
CPA4000D (1/01)	FAMILY AUTO POLICY OR HOMEOWNERS AUTO ENDORSEMENT SUPPLEMENTARY DECLARATIONS
FA1002RE (1/01)	AUTOMOBILE CHANGE ENDORSEMENT
FA4000T (10/04)	PERSONAL AUTO POLICY
HOA900 (5/03)	SPECIAL LARGE DEDUCTIBLE ENDORSEMENT
IFA(D) (10/04)	PERSONAL AUTO POLICY DECLARATIONS
IFARC (1/01)	FAMILY AUTO POLICY DECLARATIONS RENEWAL CERTIFICATE
MI1020 (10/04)	POLICY RELEASE

**THE CINCINNATI INDEMNITY COMPANY  
ARKANSAS PERSONAL AUTO  
WITHDRAWN FORMS MEMORANDUM  
DA-08-7043-AR**

<b>WITHDRAWN FORM</b>	<b>TITLE / DESCRIPTION OF CHANGE</b>
MI1026 (10/01) MI1026 (10/04)	GENERAL CHANGE ENDORSEMENT
MI1148 (6/03)	AUTO POLICY UPDATE
MI1323 (4/02)	YOUTHFUL OPERATOR QUESTIONNAIRE
MI1378 (1/06)	IMPORTANT NOTICE
MI1417 (4/02)	INDIVIDUAL HEALTH QUESTIONNAIRE
MI1659 (5/05)	NOTICE OF PRIVACY PRACTICES
MI1660 (8/04)	NOTICE OF INSURANCE INFORMATION PRACTICES
MI1684 (12/02)	GENERAL CHANGE ENDORSEMENT
MI1722AR (1/04)	ARKANSAS NOTICE
MI1733 (10/04)	NOTICE TO POLICYHOLDERS PERSONAL AUTO PROGRAM
PL1050 (6/04) PL1050 (1/96)	UNIVERSAL DECLARATIONS
PPJ (1/07)	YOUR PERSONAL INSURANCE POLICY
PPJB (1/07)	YOUR PERSONAL INSURANCE POLICY
PR1042 (4/02)	AGENTS AUTO RENEWAL QUESTIONNAIRE
RCA2000 (8/91)	AUTO RENEWAL CERTIFICATE
XA1 (4/02)	EXHIBITION AUTOMOBILE SUPPLEMENT